Association of Air Medical Services FACSIMILE



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Subject: NPRM 49 CFR 830 No. of Pages: 2

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March 11, 2005

Mr. Deepak Joshi Lead Aerospace Engineer (Structures) National Transportation Safety Board Room 5235 490 L'Enfant Plaza SW Washington, D.C. 20594

Dear Mr. Joshi:

The Association of Air Medical Services (AAMS) appreciates the opportunity to comment on the proposed revisions to Title 49 of the Code of Federal Regulations Part 830; Notification and Reporting of Aircraft Accidents or Incidents and Overdue Aircraft, and Preservation of Aircraft Wreckage, Mail, Cargo, and Records. AAMS represents over 300 air ambulance services across the country, over 85% of the civilian air medical capacity in the United States and as such, is a unified voice for the entire air medical and critical care medical transport community. Our vision is to assure that every person has access to quality air medical and critical care transport in a time of need.

AAMS appreciates the efforts that the NTSB has taken to enhance aviation safety since its inception. It is the goal of AAMS to work with the NTSB, the Federal Aviation Administration and fellow industry leaders in order to foster a safe and efficient environment to conduct air medical transports.

The stated purpose of the proposed changes to Part 830 is to enhance safety by expanding the kinds of events that must be reported to the NTSB. While AAMS applauds the NTSB's aviation safety enhancement goals, the proposal to expand the definition of substantial damage by eliminating the current exclusion for ground damage to helicopter rotor blades carries with it negative consequences probably not anticipated by the NTSB. As proposed, this change will adversely affect AAMS members and the public by causing unnecessary and significant delays in aircraft availability after minor incidents and increase operating costs to air medical transport programs.

More specifically, the NTSB proposal to modify the definition of Substantial Damage in 49 CFR §830.2 would, in effect, remove all ground damage to main and tail rotor blades, regardless of cause, from the list of exclusions. Blades damaged during ground movement while the aircraft engine is not running will be classified the same as an aircraft striking an object during flight. According to the preamble in this NPRM, the NTSB is proposing this change, among others in the order, to: "include certain events that are not currently covered by the regulations. This amendment is intended to enhance aviation safety by providing the NTSB direct notification of these events so that we can investigate and take corrective actions in a timely manner". Yet, the

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proposal does not explain why this proposed expansive amendment to the definition of "accident" is necessary.

By defining ground damage to main and tail rotor blades, regardless of how the damage occurs, as an accident, air medical aircraft will see greater down time than they currently face. Under current regulations, an operator can identify a damaged main or tail rotor blade, replace/repair the damaged part/parts, and an FAA certified mechanic then can return the aircraft to service. The proposed rule change will require operators to report the same event as an accident. Instead of simply waiting for part/parts and/or for the mechanic to complete the appropriate maintenance and paperwork, the operator will be required to ground the aircraft waiting for the NTSB to conduct an investigation. The number of events that would be captured by the proposed regulatory change is not insignificant. Unless the NTSB is in a position to proportionately increase the number of its investigators and make rapid investigation of these events a priority, the economic impact on our membership will be considerable.

The breadth of the proposed amendment to § 830.2 goes far beyond what historically has constituted an accident. The role of AAMS members is to provide safe and efficient air medical transportation of critically ill and injured patients. By changing the definition of aircraft accident in § 830.2 to include incidents unrelated to typical flight modes, the proposal will hinder this mission and decrease availability of scarce healthcare resources for critically ill and injured patients. There are time-tested procedures in place to handle ground damaged main and tail rotor blades; expanding the investigative control of these incidents to the NTSB does not, in fact, appear to serve the goal of the NTSB stated in the preamble of this NPRM.

Based on our analysis, AAMS, while lauding the goals of the NPRM, cannot support the proposed revision to Section 830.2. We stand ready to continue to work with NTSB staff to assist in identifying possible solutions to the safety concerns that may have provided the impetus for this part of the NPRM.

Sincerely,

Thomas P. Judge, CCT-P

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